FORM D

1332870

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### FORM D



OMB API	ROVAL
OMB NUMBER:	3235-0076
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Estimated average	burden
hours per response	16.00

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refix			Serial
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	Date Received		
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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Offer and sale of \$13,049,000 of limited partner interests.	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Sect Type of Filing: ☐ New Filing ☒ Amendment	ion 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)  Madrona III Manager Fund, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) T	elephone Number (Including Area Code)
1000 Second Avenue, Suite 3700, Seattle, WA 98104	06-674-3000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) T (if different from Executive Offices)	elephone Number (Including Area Code)
Investment fund focused on venture capital investments.  Type of Business Organization  Type of Business Organization	DE 3 201/6
Type of Business Organization	SEC! IS
Type of Business Organization  □ corporation □ business trust □ limited partnership, already formed □ limited partnership, to be formed	r (please\specify):
Actual or Estimated Date of Incorporation or Organization:  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	■ Actual □ Estimated te: □ E

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:

  - Each promoter of the issuer, if the issuer has been organized within the past five years;
    Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				ivialiaging i artifei
Madrona Investment Partners III,	L.P.				
Business or Residence Address		er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700	, Seattle, WA 9810	4			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or
Full Name (Last name first, if ind	ividual)				Managing Partner
Alberg, Tom A.					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Cip Code)		
1000 Second Avenue, Suite 3700	, Seattle, WA 9810	4			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				ivialiaging I arther
Goodrich, Paul					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)	<del></del>	
1000 Second Avenue, Suite 3700	. Seattle, WA 9810	4			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				ivianagnig i artiici
Gottesman, Greg					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700	, Seattle, WA 9810	4			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or     Managing Partner
Full Name (Last name first, if ind	ividual)				
McIlwain, Matt					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700	, Seattle, WA 9810	4			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or  Managing Partner
Full Name (Last name first, if ind	ividual)				
Hirsch, Chuck					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700	, Seattle, WA 9810	4			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Alberg Family Investments II, LL	С				
Business or Residence Address		er and Street, City, State, 2	Zip Code)		
c/o Tom A. Alberg, 1000 Second	Avenue, Suite 370	0, Seattle, WA 98104			

Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Raven Trust Fund					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 37	00, Seattle, WA 9810	)4			

				B. INF	ORMATIC	N ABOUT	OFFERI	NG				
1. Has the iss	suer sold, o	r does the is	ssuer intend	i to sell, to	non accredi	ted investor	rs in this of	fering?				No ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing und	ler ULOE.				
2. What is th	e minimum	investmen	t that will b	e accepted	from any in	dividual?					\$ 5,000,0	000*
* The Genera				•	•						* = 1	
											Yes 1	No
3. Does the o	offering per	mit joint ov	vnership of	a single un	it?			•••••		••••••		
4. Enter the irremuneration agent of a bropersons to be Full Name (L	for solicita ker or deal- listed are a	tion of pure er registered ssociated p	chasers in c d with the S ersons of su	onnection v SEC and/or	vith sales of with a state	securities or states, I	in the offer ist the name	ing. If a pe e of the broi	rson to be l ker or deale	isted is an r. If more	associated than five	d person or
ruii Naine (L	ast name n	ist, ii marv	iduai)									
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)			<del></del>			
Name of Asso	ociated Bro	ker or Deal	er		<del></del>			<del> </del>				<del></del>
States in Whi												
(Check ". [AL]	_				[CO]	[CT]	[DE]	_			🗖 / [HI]	All States [ID]
[IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[LA]	[ME]	[MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RJ]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L			<del>`</del> -						<del></del>			<del></del>
Business or R	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi										<del></del>		A 11 Co
(Check ".	All State" c	r check ind	ividual Sta	tes) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	All States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indiv	idual)									
Business or F	lesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)			<del></del>			
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc		.,					All States
(Check	All State C	[AZ]	AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RJ]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

and already exchanged.  Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>0</u>	\$ <u>0</u>
Equity	\$_0	\$
□ Common □ Preferred		
Convertible Securities (including warrants)	\$_0	\$ 0
Partnership Interests	\$ <u>13,049,000</u>	\$ 13,049,000
Other (Specify)	\$ <u>0</u>	\$ <u>0</u>
Total	\$ 13,049,000	\$ 13,049,000
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u> , indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
Accredited Investors	19	\$ <u>13,049,000</u> *
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of	Dollar Amoun
Rule 505	Security N/A	Sold \$ <u>N/A</u>
Regulation A	N/A	
Rule 504	N/A	\$_N/A
Total	N/A	\$ N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		□ \$ <u>N/A</u>
Printing and Engraving Costs		<u> </u>
Legal Fees		<b>⊠</b> \$ <u>25,000</u>
Accounting Fees		<u> </u>
		□ \$ <u>N/A</u>
Engineering Fees		
Engineering Fees		□ \$ <u>N/A</u>
•		

<sup>\*</sup>Total commitments to the Partnership and affiliated partnerships, including the commitment of the General Partner of the Partnership and such affiliated partnerships, is approximately \$167,000,000.

C. OFFERING P.	RICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS	
I and total expenses furnished in re-	gregate offering price given in response to Part C - Question sponse to Part C - Question 4.a. This difference is the er."	••••••		\$ <u>13,014,000</u>
used for each of the purposes shown. estimate and check the box to the left of	sted gross proceeds to the issuer used or proposed to be If the amount for any purpose is not known, furnish an of the estimate. The total of the payments listed must equal er set forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		⊠	\$*	□ \$ <u>0</u>
Purchase of real estate			<b>\$</b> _0	□ \$ <u>0</u>
Purchase, rental or leasing and ins	tallation of machinery and equipment		\$_0	<b>\$</b> 0
Construction or leasing of plant bu	uildings and facilities	. 🗆	<u>\$_0</u>	□ \$ <u>0</u>
offering that may be used in excha	ncluding the value of securities involved in this unge for the assets or securities of another		\$ 0	<b>□</b> \$ 0
			\$ 0	□ <b>\$</b> 0
• •			\$ 0	□ \$ <u>0</u>
• .	al Investments.			
			\$ <u>*</u>	
Total Payments Listed (Column to	tals added)	<del></del>	⊠ \$_	13,014,000
	D. FEDERAL SIGNATURE			
following signature constitutes an und	be signed by the undersigned duly authorized person. If this no ertaking by the issuer to furnish to the U.S. Securities and Exclude by the issuer to any non-accredited investor pursuant to paragram	hange (	Commission, up	on written reque
ssuer (Print or Type)	Signature		Date	
Madrona III Manager Fund, L.P.	They lais		February 9	, 2006
	Title of Signer (Print or Type)			
Name of Signer (Print or Type)				

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)